



AMENDMENT TRANSMITTAL LETTER			CLIENT-MATTER NO.: 66655-021 (PN-NI 4447)	
SERIAL NO: 09/733,607	FILING DATE: December 8, 2000	EXAMINER: S. Wegert	GROUP ART UNIT: 1647	CONFIRMATION NO.: 4199
INVENTION: For: VIGILANCE NUCLEIC ACIDS AND RELATED DIAGNOSTIC, SCREENING AND THERAPEUTIC METHODS				

TO: Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

CERTIFICATE OF MAILING BY "EXPRESS MAIL"	
"Express Mail" Mailing Label Number: EV 400 552 305 US	
Date Of Deposit: March 17, 2004	
I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office To Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to Commissioner for Patents, PO. Box 1450, Alexandria, VA 22313-1450.	
Printed Name of Person Mailing Paper or Fee: Leand Bantados	
Signature of Person Mailing Paper or Fee: <i>[Signature]</i>	

Dear Sir:

Transmitted herewith is a response to the Office Action mailed September 17, 2003, in the above-identified application.

- ☐ Small Entity status of this application has been established under 37 CFR 1.27.
- ☒ Petition for the Three-Month Extension of Time is enclosed (in duplicate).
- ☐ Terminal Disclaimer with fee under 37 C.F.R. 1.20(d) is enclosed.
- ☒ No additional claims fee is required.
- ☐ An additional claims fee is required and has been calculated as shown below:
- ☒ Notice of Appeal (in duplicate).

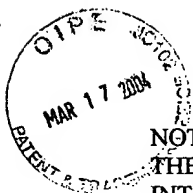
CLAIMS AS AMENDED

	NUMBER AFTER AMEND- MENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		NUMBER OF EXTRA CLAIMS PRESENTED		RATE			FEE	
							SMALL ENTITY	OTHER ENTITY		SMALL ENTITY	OTHER ENTITY
TOTAL CLAIMS	2	-	20	-	0	x	\$9	\$18	=	\$0.00	\$
INDEPEN- DENT CLAIMS	9	-	3	-	6	x	\$42	\$84	=	\$0.00	\$
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
			YES		X NO		\$140	\$280	=	\$0.00	\$
							TOTAL ADDITIONAL FEE			\$0.00	\$

- * If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in this space.
- ** If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in this space.
- *** If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 0, write "0" in the space.

X Please charge my Deposit Account No. 502624 the amount of \$1,280.00, \$330.00 which covers the Notice of Appeal fee, and \$950.00 which covers the fee for a three-month extension of time. A duplicate copy of this sheet is enclosed.

X The Commissioner is hereby authorized to charge payment of any fees associated with this communication or credit any overpayment to Deposit Account No. 502624. A duplicate copy of this sheet is enclosed.



NOTICE OF APPEAL FROM THE EXAMINER TO
THE BOARD OF PATENT APPEALS AND
INTERFERENCES

Client-Matter No.: 66655-021
(P-NI 4447)

In re Application of Tononi et al.

Serial Number: 09/733,607

Filed: December 8, 2000

For: VIGILANCE NUCLEIC ACIDS
AND RELATED
DIAGNOSTIC, SCREENING
AND THERAPEUTIC
METHODS

Group Art Unit: 1647

Confirmation No.: 4199

Examiner: S. Wegert

Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

03/22/2004 YPOLITE1 00000036 502624 09733607

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CERTIFICATE OF MAILING BY "EXPRESS MAIL"

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Date Of Deposit: March 17, 2004

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Printed Name of Person Mailing Paper or Fee: Leonard Bantados

Signature of Person Mailing Paper or Fee:

Applicant hereby appeals to the Board of Appeals from the decision mailed September 17, 2003.

1. ☒ Appeal fee (37 C.F.R. 1.17(b))
 - ☒ other than small entity \$330.00
 - ☐ small entity \$165.00
 - ☐ Verified statement attached
 - ☐ verified statement previously filed in prior application _____ and such status is still proper.
2. ☒ A petition for an extension of time for reply to the rejection is attached.
 - ☐ Extension fee (37 C.F.R. 1.17(a) - (c))
 - ☒ other than small entity
 - ☐ \$110.00 ☐ \$420.00 ☒ \$950.00 ☐ \$1,480.00
 - ☐ small entity
 - ☐ verified statement attached
 - ☐ verified statement previously filed in prior application _____ and such status is still proper.
_ \$ 55.00 _ \$210.00 _ \$475.00 _ \$740.00
3. Please charge my Deposit Account No. 502624 the amount of \$1,280.00, \$950.00 of which covers the fee for a three-month extension of time and \$330.00 which covers the notice of appeal fee. A duplicate copy of this sheet is enclosed.
4. ☒ The Commissioner is authorized to charge any additional fees required to file a Notice of Appeal to Deposit Account No. 502624. A duplicate copy of this sheet is enclosed.

Dated: March 17, 2004

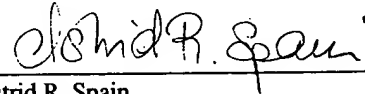
Astrid R. Spain
Registration No.: 47,956
Attorney for Applicant

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San Diego, California 92122
Telephone: 858-535-9001

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Filed: December 8, 2000
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X The Commissioner is hereby authorized to charge to Deposit Account No. 502624 any fees under 37 CFR 1.17 which may be required under 37 CFR 1.136(a)(3) for an extension of time in any concurrent or future reply requiring a petition for extension of time. A duplicate copy of this sheet is enclosed.

Respectfully submitted,



Astrid R. Spain
Registration No. 47,956
Telephone: (858) 535-9001
Facsimile: (858) 535-8949

Date: March 17, 2004

McDERMOTT, WILL & EMERY
4370 La Jolla Village Drive., Suite 700
San Diego, California 92122